

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET

SERIAL NO. 10/766 104

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1	/		/			
2	/		/			
3	/		/			
4	/		/			
5	/		/			
6	/		/			
7	/		/			
8	/		/			
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44	/		/			
45	/		/			
46	/		/			
47	/		/			
48	/		/			
49	/		/			
50	/	2	/			
TOTAL IND.	82		48			
TOTAL DEP.	10		50			
TOTAL CLAIMS	50					

CLAIMS	IND		DEP		IND		DEP	
	IND	DEP	IND	DEP	IND	DEP	IND	DEP
51	/		/		/			
52	/		/		/			
53	/		/					
54	/		/					
55	/		/					
56	/		/					
57	/		/					
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99								
100								
TOTAL IND.	0		0					
TOTAL DEP.	18		18					
TOTAL CLAIMS	18		18					